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PTO/S8/22 (12-04)
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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------|----------------------------------|--|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 | | Docket Number (Optional) 1279-400С1/10400842 | | |
| (Fees pursuant to the Consolidated Appropriat | ons Act, 2005 (H.R. 4818).) | | | |
| Application Number 10/ | 759,505 | Filed Ja | nuary 16, 2004 | |
| BINAPHTHOL BASED CHROMOPH EMITTING DIODES | ORES FOR THE FABRICAT | | | |
| Art Unit 1774 Confirmati | on No. 7669 | Examiner C | amie S. Thomson | |
| This is a request under the provisions of 37 dentified application. The requested extension and fee are as folious of 37 one month (37 CFR 1.17(a)(1)) Two months (37 CFR 1.17(a)(2) | ows (check time period destr <u>Fee</u> \$120 | | propriate fee below): | |
| X Three months (37 CFR 1.17(a) | | \$510 | \$ 1020.00 | |
| Less 2 mo extension paid 1/9/0 | | | | |
| | • | | \$1020.00 | |
| X Due with this filling | | | 4.444 | |
| Applicant claims small entity status. | See 37 CFR 1.27. | | | |
| A check in the amount of the fee is e | nclosed. | | | |
| X Payment by credit card. Form PTO- | 2038 is attached. | | | |
| The Director has already been author | | onlication to a Dep | nsit Account. | |
| I am the applicant/inventor. | the entire interest. See 37 | osed a duplicate cop | | |
| Statement under | 37 CFR 3.73(b) is enclosed ecord. Registration Numbe | . (Form PTO/SB/96 | 3). | |
| | | | <u> </u> | |
| x attorney or agent un | der 37 CFR 1.34. if acting under 37 CFR 1.34 | 20,121 | | |
| Registration | A. | | 4 2008 | |
| Signature | | <u>Ma</u> | y 1, 2006 Date | |
| Robert Berline | r | (213 |) 533-4171 | |
| | Typed or printed name | | Telephone Number | |
| NOTE: Signatures of all the inventors or assignces of them one eignature is required, see below. | ecord of the entire interest or their repr | esentative(s) are required. | Submit ताधरीकृष्टि forms if more | |
| Total of form | s are submitted. | | | |
| | | | | |
| | | 18.1 | ケフノ - クフマーとマル | |
| Request for I hereby certify that this correspondence is being of MS RCE, Commissioner for Patents, P.O. Box 145 | 0, Alexandra, VA 22313-1450. 0 | n the date shown below | an envelope addressed to: | |
| Dated: May 1, 2008 Signature: | fear Dore | (Jean Bove') | | |